NATIONAL Assessment Centre Service	\$			
301 (12018 13:04 16b descri		Date British Co. 1		
REING NA/INC18021594/ky SASE-1		Date &Time Completed	D	one py.
) el blo CTC				
7011-0	Claim Form			
	W/O (Within: OD 2hrz	MT/102209	9-001	01/12/18
	Uploaded	TP 4hrs)		11 1000
	nt/Survey Report			
	ort by Fax / Hand to	0.0000.00		·····
Preferred Wksp / INC Assign Wksp / QW; (	THE PERSON OF	T. /	-	
PP Particulars: - Veh No: PEDESTRIA	N INC		ax:	
Owner / Driver: (	10 , 1140 (	)/Non-INC( ) Tel:		
Policy No: ( ) Period: (	)	Cover Type: (		
Confirmed by: (	Date:	Time:		
Insured/Driver Liability: ( %) [Note-Est. Statu	31000000000000	%; P: 21-79%. P: 80-1	(00%)	
) Warranty: YES	( )/NO( )			
Excess: (\$ ) Loading: \$1,000 ( )/\$2,0	000()			
eneral Remarks:-	e de la companie de l	SMSSLES LEAD		
- Customer's information strictly	Confidential & Strice	tly NO refer of repairer.		
to e-man insurer URGENTL	Υ.			
), mvoice: YES ( )	/ NO ( ) ; Tov	ving Co: (	*	)
marks: (INC horline: 6788 6616)		Date&Time Completed	harry Par	
Apply for Transport Allowance ( ) / Courtesy Car (	)	Sassayane Ovinpie 3d	Dor	ie.by
QC Check / Post Repair Inspection (	)			
Upload Resurvey Photo [Repair Cost > \$3000] (	)			
njury:		- 1		
Time Actions	CHARLES SERVICES			
			1	·
NA1807824	Invoice Prepar	ation Checklist	Anit (\$)	Amit (\$)
mant's Particulars :-	1) AR: Accident Rep	EXECUTABLE DESCRIPTION OF THE PROPERTY.	Lit Bill	Add.Bill
r:/Owner,	2) DA : Damage Asse 3) TF : Towing Fee	ssment (\$100); INC (\$30)		
1.1.No:	4) FT : Follow-Throu	\$40/\$4 gh Survey \$12	20	
	For claiming again	gh Survey (Resurvey) \$3 st ING Only (wel 10 Jan 2005)	0	
ged Portion:	6) TR: Re-inspection 7) N1: Idao DA + SN	\$7		<u></u>
7111	6) NTUC Additional 3	Survices:- \$16	0	
hecked by (Engr-In-Charge):	*N5: Courlesy Car	/Tpt Allowance \$	5	
tors! Comments :-	*N6: Repair Co-ord	inution \$1	0	
C113. Comments::	*N7: Post Repair In	excess Coordination 5	-	
	TP (NII) : TP (Nor	INC) against INC \$20	0	
_0	9) N12: Idne Mobile Invoice dated	Fee Charged	-	Mester #16
		4	BARRY (SAME)	

#### SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies,
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties,

<ol><li>By the lodgement of this report to the insurers, you hereby constoresaid.</li></ol>	sent to the archiving of this report at the centre and to copies of the report being made available
A Control of the Cont	ACCIDENT STATEMENT
Date Of Report	30/11/2018 13:04
Date Of Accident	29/11/2018 20:30
Exact Location Of Accident	X-JUNC OF PAYA LEBAR ROAD AND GEYLANG ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJG5105T
Insured/Policyholder	
Name Of Registered Owner	TAN TIAN FOO
NRIC No	S2675721E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94558538
Alternative Phone No	OTHERS-94558538
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	PREVIA 7 SEATER
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5065776879-04
Cover Note Number	
Driver	
Name of Driver	TAN TIAN FOO

TAN TIAN FOO NRIC No S2675721E Date Of Birth 01/07/1964 Occupation **INDOOR** Date Of Driving Pass 28/04/1983

Driving Experience 35 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94558538

Fax Number

Contact Number OTHERS-94558538

EMail Address NOEMAIL

BLK 126 PENDING ROAD Address

#05-302 670126

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Postcode

Insurance Company of Driver's Own Vehicle

#### General Information of the Accident

Type Of Accident COLLIDED INTO PEDESTRIAN

Weather Conditions CLEAR Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

Was any body injured in the Accident? NO Was any injured conveyed to hospital by NO ambulance?

Was any other material or property damaged? NO I have been approached by unknown person(s) NO soliciting/offering accident claims assistance. Number of Passengers (Including Driver) 1

### **Details of Police Action**

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name **BUKIT PANJANG** 

Police Station Address ROAD: 1 SEGAR ROAD , POSTCODE: 677738 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-8929999 - FAX NO:

NO

Was notice of intended Prosecution given?

If Yes, against whom?

# Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20181129/2163

## Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES Remarks/ Reasons: REVERT Was there any audio recorded? NO

### SKETCH PLAN

## IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
  Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
  interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

11. 30/11/2018

Name:

NRIC/FIN No .:





Police Station Of Origin: Bukit Panjang N.P.C

1 Segar Road #01-05 SINGAPORE 677738

Tel No: 1800-8929999

1 of 3 Report No. T/20181129/2163

# REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/11/2018 22:57		/lade:	Vide Report No.:	Station Diary No.: 258	
Informa	nt's Partic	ulars	THE REPORT OF STREET	CHARLES AND AND ADDRESS OF THE	
Name of	f Informant: N FOO		Address: APT BLK 126 PENDING ROA	AD #05-302 SINGAPORE 670126	
ID Type / ID No.: NRIC NO / S2675721E			Contact No.: Home/Office: Mobile: 94558538		
	Nationality: MALAYSIAN		Email:		
Sex: Male	Age: 54	Date of Birth: 01/07/1964	Type of Informant:		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Director			Driving Licence Information: Class: 2B,2A,3	Date of Expiry:	

Type of Accident:	Injury Conveyed By Ambulance		Drink Drive: No	Date/Time of Accident: 29/11/2018 20:30		Type of Location X-Junction	
PAYA LEBAR GEYLANG R		O AND (	GEYLANG I	ROAD	900.		
Weather: Road			Road Surface: Dry		Road Speed Limit:		
Traffic Flow: Traffic Control: Traffic Light - Working						Traffic Volume: Light	
Type of Collis	ion: le Against - Pedestrian				Any	one conveyed by	

Details of V	ehicle Invo	lved	COLOR BEST	THE STATE OF THE STATE OF		
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJG5105T	Car	ТОУОТА	PREVIA 7 SEATER	Green	No Damage	0

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
SJG5105T	NTUC Income Insurance Co-Operative Limited	5065776879-04	01/09/2018	31/08/2019		



T/20181129/2163

Police Station Of Origin: Bukit Panjang N.P.C 1 Segar Road #01-05 SINGAPORE 677738 Tel No: 1800-8929999

2 of 3 Report No. T/20181129/2163

CONTINUATION OF REPORT

Any Pedestrian I						TATOMA SINGE
No. of Pedestriar	ns Injured: 1		II (D			
Driver	is injured. T	TO DESCRIPTION	Use of Pe	destria	n Cross	sing: Used
Name	TAN TIAN FOO			ID No	).	S2675721E
Related Vehicle	SJG5105T (Car)			Conta	act No.	94558538
Hospital/Clinic	NIL			Class Drivin Licen	g	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

## Brief Details.

On 29th November 2018 between 2030hrs and 2100hrs, I was driving my vehicle SJG5105T(Toyota/Previa/Light green in colour) at the X junction between Paya Lebar road and Geylang road. The weather was clear and the road was dry at that point of time.

As I was making a right turn from Paya Lebar road towards Geylang road on the green light, one pedestrian(female/Filipino/ 20 to 30 years old) suddenly crossed the road. I immediately applied my vehicle's brakes but my vehicle could not stop in time, resulting in a collision with the said pedestrian. My vehicle was travelling at a low speed while maneuvering the turn.

Upon collision, I alighted from my vehicle and had rendered assistance to the said pedestrian. The said pedestrian was still able to stand on her own and I could not spot any visible injury on her. A passerby had called for an ambulance and the said pedestrian had been conveyed to the hospital not long later.

Traffic police was at scene and had seized my in-vehicle video recording system's memory card.

Juny.





Police Station Of Origin: Bukit Panjang N.P.C 1 Segar Road #01-05 SINGAPORE 677738 Tel No: 1800-8929999 3 of 3 Report No. T/20181129/2163

CONTINUATION OF REPORT

# Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference

Signature Of Officer Recording The Report: J / Sgt 2 MUHAMMAD SIDDIQ BIN RAMLAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 29/11/2018 22:57
Officer In Charge Of Case: TP / GIT / Sgt 2 HO JIEKANG, IVAN Contact No.: 65476170	Classification Of Case:
Authentication Stamp  IP168  Authentication Stamp  IP168  Force	

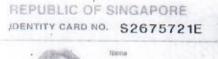


la Zichie Todge NF 168

SINGAPORE POLICE FORCE

ACKNOWLEDGEMENT SLIP

Ref: Report No: 6 70 5 129 010	
L MET ALCOH	
(Recipient's Name, NF	RIC or Passport No. / Rank and No.)
Or .	Police Station / NPC / NPP)
hereby acknowledge receipt of the below mention	
1 _U/LE (ROUG noem card	
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from Trun 7 con 826757	21E 94556538
of BIZE PENDING Rd # CO	
	olice Station / NPC / NPP)
(Date)	(Time)
Witnessed by / * Handed over by: (* Delete if applicable)	Received by:
91/826457217	
(Signature)	(Signature)
(Name, NRIC or Passport No. / Rank and No.)	(Name, NRIC or Passport No. / Rank and No.)
Other Remarks:	





TAN TIAN FOO

陳天宝

CHINESE

Date of birth 01-07-1964

Country of birth MALAYSIA











## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189) MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5065776879-04

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

: SJG5105T

Chassis Number

: JTEGD54MX07105595

2. Name of Policyholder

: TAN TIAN FOO

3. Effective Date of Insurance

: IAN HAN FUC

a F / B / F

: 01 Sep 2018

4. Expiry Date of Insurance

: 31 Aug 2019

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

#### This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

 EXCESS (SECTION 1)
 : \$\$600

 EXCESS (SECTION 2)
 : N/A

 WINDSCREEN EXCESS
 : \$\$100

 ADDITIONAL EXCESS
 : N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO
INSURE WITH COE : YES
NCD PROTECTION : NO
TRANSPORT ALLOWANCE : NO
EXCESS WAIVER : NO

PRIMARY DRIVER : TAN TIAN FOO NAMED DRIVER (1) : TAN JUN BANG

NAMED DRIVER (2) : N/A HIRE PURCHASE COMPANY : N/A

SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency

: ABWIN PTE LTD (00000614234)

Date of Issue

: 31 Jul 2018 10:39 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

eBaoTech GeneralClaim Hello, NAC\_PAYA\_UBI\_800601 · Change Language · Change Password Log Out My Desktop **Policy Query** Notice of Loss Policy No. Date of Accident 29/11/2018 20:30 Vehicle No.(For Motor) SJG5105T Certificate Number Search Policyholder NRIC Certificate Policyholder Vehicle No. Insured Object Select Policy No. Commence Date Product Cover Type Expiry Date Number Name 5065776879+ 04 TAN TIAN FOO drivo CLASSIC S2675721E GPC SJG5105T SJG5105T 01/09/2018 31/08/2019 Continue

## Policy Information

Policy No.	5065776879-04	Policyholder Name	TAN TIAN FOO	Policyholder NRIC	S2675721E
Certificate No.					
Address	BLK 126 #05-302 PENDING RC	AD SINGAPORI	E 670126		
roduct vame	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
olicy ssue Date	31/07/2018	Effective Date	01/09/2018 00:00	Expiry Date	31/08/2019 23:59
hird arty xcess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0		
\gent	ABWIN PTE LTD	Agent Tel.	68423301	GST Flag	Y
lo- nsurance lag	No				
Open Policy Info					
Certificate nfo					
Policyh	older Mailing Address				
ddress 1	BLK 126 #05-302	Address 2	PENDING ROAD	Address 3	SINGAPORE 670126
ddress 4		Address Type	Singapore address	Post Code	670126
Init No.		Related Policy Number	5065776879-04		
Insure	d Object: SJG5105T				
	ements				
		Endorse			

Claim Handling

#### Accident MT/1022099 Policy No. 5065776879-04 Vehicle No. S)G5105T GST Registration No Certificate No. Policyholder Name TAN TIAN FOO Policyholder NRIC Product Code PRIVATE CAR INSURANCE Cover Type drivo CLASSIC Loading Contact No.(Mobile) 94558538 Contact No.(Office) Contact No.(Home) Email Address Special Remark eCode No Yes TCA W No Yes eCode Reason NCD Protection No NCD Entitlement(%) 40 Private Hire Accident Details Report Date 01/12/2018 09:14 Accident Report Within 24 hrs Yes Accident Type Date of Accident 29/11/2018 Time of Accident hh:mm 20:30 Country of Accident Reporting Centre Orange Force ICM No. Accident Location X-JUNC OF PAYA LEBAR ROAD AND GEYLANG ROAD Excess Own damage Excess 600.00 Additional Excess Windscreen Excess Unnamed Driver Excess 0.00 Outside Singapore OD Excess 600.00 Third Party Excess 0.00 Outside Singapore TP Excess 0.00 Benefits ■ GST Registered Information **GST Registered** No **GST Registration Date** GST Registration No. GST Status Verified Yes Modification History Policyholder Mailing Address Address 1 BLK 126 #05-302 Address 2 PENDING ROAD Address 3 Address 4 Address Type Singapore address Post Code Unit No. Related Policy Number 5065776879-04 OI Driver Info Driver Name TAN TIAN FOO Driver Type Main Driver Unnamed driver Name Driver NRIC S2675721E Driver DDB Register Date of Driver License 28/04/1983 Driver Age 54 **Driving Experience** Contact No.(Mobile) 94558538 Contact No.(Office) 0 Contact No.(Home) Address 1 BLK 126 Address 2 PENDING ROAD Address 3 Address 4 Address Type Singapore address Post Code Unit No. #05-302 Does he own a Singapore Registered car? Yes - No Driver Vehicle No. Driver Insurer Com Declaration Breathalyser or Blood Test 0 ma Any injury? Yes No Mudification History Claim 001 OD-MX New Claim Type \* Insured Name OD-MX TAN TIA Contact Contact No.(Mobile) 94558538 No. 676690 (Home) O1 Vehicle Email Address SJG510 Number Claim Description SJG5105T / PEDESTRIAN ON 29 Nov 2018 Preferred Insured Liability Partially at Fault Preferend Contect No. Yes GIA Preferred Workshop, Name unknown report Received Date Registered Close 01/12/2018 09:21 Workshop Repairer Report Taken By

Print AK letter

Save Submit Attachment Accident No. MT/1022099 Claim No. Last Doc. Received Yes No Upload Date 01/12/2018 09:25 Path . Category \* Confidential Choose File No file chosen Clear Please Select \* NO Choose File No file chosen Clear Please Select \* NO Choose File No file chosen Clear Please Select NO Chaose File No file chosen Clear Please Select NO Choose File No file chosen Clear Please Select NO Choose File No file chosen \* NO Clear Please Select Message Read Attachment List Attachment. Uploaded By/Date Category Urgency Des NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:20 NRIC/ Driving License Normal NRIC/ Driving I NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on SAS Normal SAS 2 01 Dec 2018 09:19 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:18 Photos Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:18 Photos Normal NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:18 Photos Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:18 Photos Normal NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:18 Photos Photos NAC\_PAYA\_UB1\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:18 Photos Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal Photos 01 Dec 2018 09:18 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:18 Photos Normal Photos NAC\_PAYA\_UBI\_B00601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:18 Photos Normal NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:18 Photos Normal NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal Photos 01 Dec 2018 09:18 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:18 Photos Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 01 Dec 2018 09:18 Photos Normal Video List Uploaded By/Date Folder Date File Name Display in New Window Scan and uploading